Effective on 12082004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4618). FEE TRANSMITTAL For FY 2009				Complete if Known					
				Application Number 10/790,602-Conf. #9169					
				Filing Date	N	March 1, 2004			
				First Named Inv	entor L	Lyndsay Williams			
				Examiner Name	E	E. D. Bertram			
Applicant claims small entity status. See 37 CFR 1.27				Art Unit 3766					
TOTAL AMOUNT OF PAYMENT (\$) 940.00				Attorney Docket No. M1103.707			7US00		
METHOD OF PAYMENT (check all that apply)									
Check x Credit Card Money Order None Other (please identify):									
Deposit Account Deposit Account Number: 23/2825 Deposit Account Name: Wolf, Greenfield & Sacks, P.C.									
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)									
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filling fee									
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17									
FEE CALCULATION									
1. BASIC FILING, SEARCH, AND EXAMINATION FEES									
	FI	LING FEES Small Entity	SE	ARCH FEES Smail Entity	EXAMINA	ATION FEES Small Entity			
Application T	ype Fee (\$		Fee (\$		Fee (\$)	Fee (\$)	Fees	Paid (\$)	
Utility	330	165	540	270	220	110			
Design	220	110	100	50	140	70			
Plant	220	110	330	165	170	85			
Reissue	330	165	540	270	650	325			
Provisional	220	110	0	0	0	0			
2. EXCESS CL	AIM FEES							Small Entity	
Fee Description Each claim ove	r 20 (including Reiss				Fee (\$) 52	Fee (\$) 26			
Each independent claim over 3 (including Reissues)							220	110	
Multiple dependent claims							390	195	
Total Claims	Extra Claim	Fee (\$)	F	ee Pald (\$) Multiple Dependent Claims					
25 -43 or HP 0 x == HP = highest number of total claims paid for, if greater than 20.				 	Fee	L(S) F	ee Pald (<u>\$)</u>	
				ee Pald (\$)				_	
4 -8 or HP = 0 x = HP = highest number of independent claims paid for, if orester than 3.									
3. APPLICATION SIZE FEE									
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer									
	ler 37 CFR 1.52(e)),				or small ent	tity) for each ac	ditional 5	0	
	action thereof. See 3					_			
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof - 100 = /50 = (round up to a whole number) x = Fee (\$)									
4. OTHER FEE(S) Fees Paid (\$)									
Non-English Specification. \$130 fee (no small entity discount)									
Other (e.g., late filing surcharge): 1251 Extension for response within first month							130.00		
1801 Request for continued examination (RCE) (see 37 810.00									
SUBMITTED BY	- 17			Registration No.					
Signature	Cent Jo	18		Registration No. 65,139 (Attorney/Agent)		Telephone	617.646.8000		
Name (Print/Type) Andrew J. Tibbetts						Date May 5, 2010			

Certificate of Electronic Filing Under 37	CFR
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Certificate of Electronic Filling Under 37 CFR 1.8

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted via the Office electronic filling system in accordance with § 1.5(c)(4).

Signature: Scott R. Whitemore Dated: May 5, 2010